



ALLAMA IQBAL OPEN UNIVERSITY

Application Form for Re-checking of Answer Book (s)

1. Name (Capital Letters): _____
2. Father's Name: _____
3. Roll No. _____ Registration No. _____
4. Semester: _____ Mobile No.: _____
5. Answer Book(s) To Be Re-Checked (please mention course code (s) below):
i) _____ ii) _____ iii) _____
iv) _____ v) _____ vi) _____
6. Name of Examination Centre: _____ Center No. _____
7. Postal Address:

8. Fee Paid Rs. _____ vide Bank Challan No. _____ Dated: _____
(Fee will be accepted only through Bank Challan)
9. I have read the instructions / important note given below and undertake to abide by the rules and regulations of AIOU.

INSTRUCTIONS

1. Fill-in the re-checking form carefully.
2. Attach photocopy of Result Intimation Card, Roll No. Slip and CNIC.
3. Deposit re-checking fee:
PTC, CT, ATTC, B.Ed, Matric, FA, Graduate Programmes: **Rs.700/- per course**
BS, M.A, M.Sc. PGD & Equivalent: **Rs.800/- per course**
MS, M.Phil, Ph.D, & Equivalent: **Rs.1000/- per course**

Attach original receipt with the application form.

IMPORTANT NOTE

1. An application form shall be entertained only if it is complete in all respect and received in the office along with the prescribed fee within 45 days from the date of declaration of the relevant result.
2. Incomplete, incorrect & time barred application shall not be entertained.
3. The answer script(s) of the candidate shall not be re-assessed.
4. Whereas, the re-checking does not mean re-assessment or re-evaluation of the answer script, the re-checking committee shall see that:
 - a. There is no mistake in the grand total on the title page of the answer script.
 - b. The total of various parts of a question has been correctly made at the end of each question.
 - c. All totals have been correctly brought forwarded on the title page of the answer script.
 - d. No portion of any answer has been left un-marked.
 - e. Total marks in the answer script tally with the result intimation card
5. Answer Book(s) shall not be shown to the candidate or anybody on his/her behalf.

Dated: _____

Signature of Applicant